

AFFIDAVIT OF BENEFIT UNIT TRANSFER

The purpose of this form is to align the current RWD#5 Membership Records for the property serviced by RWD #5 for BU# _____, with the current Landowner Deed on file with the Cowley County Register of Deeds. Registered RWD landowner(s) on file: _____
Register of Deeds landowner(s) on file: _____

According to our bylaws "participating Members shall be Owners of land who have subscribed to one or more Benefit Units. Benefit Units shall follow the title of the land. No transfer in ownership of Benefit Units shall be permitted without the approval of the Board." This Affidavit is to reflect in our records the accurate standing of the membership and the current recorded deed.

1. Our/My name is _____.
2. On or about _____, I/we purchased inherited received transferred placed in trust incorporated other _____, the real estate serviced by Rural Water District No. 5, Cowley County, Kansas, **Benefit Unit No.**_____ from _____ to _____.
3. The previous owner's interest in the Benefit Unit was included as part of the real estate transfer.
4. As Assignee Trustee Executor Authorized Agent Other _____, I/we agree to accept assignment of that Benefit Unit, and to assume and be bound by all of the obligations imposed upon the holder of such Benefit Unit by the By-Laws and Rules and Regulations of Rural Water District No. 5, Cowley County, Kansas.
5. I/we agree to pay the normal \$40.00 transfer fee to Rural Water District No. 5 that is charged for all changes in ownership when Deeds are filed with the Register of Deeds Office. I understand if I refuse to pay this fee by invoice, my account will be charged.
6. In the event I/we transfer the real estate, or refile a deed for the real estate serviced by Rural Water District No. 5, Cowley County, Kansas, **Benefit Unit No.** _____ in the future, I/we agree to advise Rural Water District No. 5 of the transfer, complete any necessary forms or other paperwork, and pay the normal costs associated with that transfer.

Signature of Assignee Trustee Executor Authorized Agent Other

Signature of Assignee Trustee Executor Authorized Agent Other

(This section to be completed by RWD #5)

CONSENT TO TRANSFER OF BENEFIT UNIT

Pursuant to the approval of the Board of Directors of Rural Water District No. 5, Cowley County, Kansas, said Rural Water District hereby consents to and approves the above referenced transfer of the Benefit Unit.

Approved this date: _____, Rural Water District No. 5, Cowley County, Kansas,.

Chairman, Board of Directors

Secretary, Board of Directors

For Office Use Only: BU/PU No. ____ Inv. _____ Pd _____

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